## RSPA WAIVER REQUEST

TITLE (state applicable functional area in 6 words or less): Annual Travel Orders

1. What internal rule, regulation, policy, proceed	dure, process, etc. are you requesting to be
waived (cite rule and provide brief narrative): RSPA Order 1100.2A, Delegations of Authority and the RSPA Administrator's memorandum of 1/28/98, Blanket Travel Open Authorizations for	
for the Administrator's approval of annual travel	orders for AAs and SODs on a trial basis from
March 1 through September 30, 1998. This "up-	
process for AAs and SODs, which includes the D	
Center. These open authorizations would be rene	
2. What organizational benefit do you expect to	
the process, allows for expeditious approval, and	reduces paperwork
3. How long do you want this waiver to be in ef	fect? Permanently
4. By submission of this form, consultation has	been completed with ("x" where applicable):
( )Approving Official ( )Labor Union ( X ).	
5. Name of Initiator:	Telephone No
has submitted this waiver request on:	·
6. (X) "Up-front" Waiver ("x" if applicable)	
APPROVING OFFICIAL:	
This waiver request has been ("x" where applied	
(X) Approved by May Con	er on 10/15/98
(Kelley S. Coyner, Admini.	strator)
( ) Recommended for disapproval by	on
because: (Typ	ped Name and Title)
INDEPENDENT OFFICIAL:	
( ) Approved by	on
(Stephen D. Van Beek, Deputy A	
( ) Disapproved by	on
(Stephen D. Van Beek, Deput	y Administrator)